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February 9, 2006

**FAX**

RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
Office of Petitions 572-272-3282	571-273-0025	U.S. Patent and Trademark Office Alexandria, Virginia

**URGENT - DECISION REQUESTED PRIOR TO ISSUANCE OF PATENT**  
**CONFIDENTIAL - Application Serial No. 10/821,928 (SAIC0056-CON2)**
Attached please find:

Transmittal Form (1 p.); Fee Transmittal (1 p.); Petition to Withdraw Application From Issue Under 37 C.F.R. §1.313(c)(2) to Permit Consideration of a Request for Continued Examination Under 37 C.F.R. §1.114 (2 pp.); Request for Continued Examination (RCE) (1 p.); Submission Required with Request for Continued Examination (RCE) Pursuant to 37 C.F.R. 1.114; Form PTO-1449; Credit Card Payment Form (PTO-2038) - \$920.00 (\$130.00 - Petition Fee and \$790.00 - RCE Fee)

 Applicant(s): Jessica M. SUNSHINE, et al.  
 Title: METHOD FOR SELECTING REPRESENTATIVE ENDMEMBER COMPONENTS FROM SPECTRAL DATA  
 Serial No.: 10/821,928  
 Filing Date: April 12, 2004  
 Docket No.: SAIC0056-CON2

 If you have any questions, please do not hesitate to contact us.  
 Michael J. Dimino (Reg. No. 44,657)
**Michael J. Dimino**

FROM

13

PAGES (WITH COVER)

36609/300436

CLIENT/MATTER NO.

REFERENCE NO.

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PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0851-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/821,928	
	Filing Date	April 12, 2004	
	First Named Inventor	Jessica M. SUNSHINE, et al.	
	Art Unit	2623	
	Examiner Name	Vikkram Bali	
Total Number of Pages in This Submission	10	Attorney Docket Number	SAIC0056-CON2


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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 C.F.R. 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Petition to Withdraw Application From Issue Under 37 C.F.R. §1.313(c)(2) to Permit Consideration of a Request for Continued Examination Under 37 C.F.R. §1.114 (2 pp.); Request for Continued Examination (RCE) (1 p.); Submission Required with Request for Continued Examination (RCE) Pursuant to 37 C.F.R. 1.114; Form PTO-1449; Credit Card Payment Form (PTO-2038) - \$920.00 (\$130.00 - Petition Fee and \$790.00 - RCE Fee)
<div style="border: 1px solid black; padding: 5px;">Remarks</div>		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Kilpatrick Stockton LLP, 607 14 <sup>th</sup> Street, N.W., Suite 900, Washington, DC 20005		
Signature			
Printed Name	Michael J. Dimino		
Date	February 09, 2006	Reg. No.	44,857

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name		Date	

PTO/SB/17 (01-08)

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2006**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

**Complete If Known**

Application Number	10/821,928
Filing Date	April 12, 2004
First Named Inventor	Jessica M. SUNSHINE, et al.
Examiner Name	Vikram Bali
Art Unit	2623
Attorney Docket No.	SAIC0056-CON2

**FAX RECEIVED****FEB 09 2006****OFFICE OF PETITIONS****METHOD OF PAYMENT (check all that apply)**☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 501458 Deposit Account Name: Kilpatrick Stockton LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

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**FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 20 or HP =	x	=	

HP = highest number of total claims paid for, if greater than 20.

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**


If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition Fee - \$130.00 (1.17(h)) and RCE Fee - \$790.00 (1.17(e))**Fees Paid (\$)****\$920.00****SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 44,657	Telephone (202) 508-5800
Name (Print/Type)	Michael J. Dimino	Date February 09, 2006	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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